| United St North | ates Ba ern Dis | | | T7 1 4 T3 4040 | | | | | luntary Petition | | |
|--|--|--------------|--------------------|---|---|-------------------|---------------------------------------|--------------------------|-----------------------------------|--|--|
| Name of Debtor (if individual, enter Last, First, Middle): Ottolenghi, Diane | | | | Name of J | Name of Joint Debtor (Spouse) (Last, First, Middle): | | | | | | |
| All Other Names used by the Debtor in the last 8 years (include married, maiden, and trade names): | | | | | All Other Names used by the Joint Debtor in the last 8 years (include married, maiden, and trade names): | | | | | | |
| Last four digits of Soc. Sec. or Individual-Taxpayer (if more than one, state all): 2229 | I.D. (ITIN) | /Com | plete EIN | | Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN) /Complete EIN (if more than one, state all): | | | | | | |
| Street Address of Debtor (No. & Street, City, State 241 Rhein Ave Mansfield, OH | & Zip Code | e): | | Street Add | Street Address of Joint Debtor (No. & Street, City, State & Zip Code): | | | | | | |
| Mansheld, On | ZIPCOD | E 449 | 903 | | | ZIPCODE | | | | | |
| County of Residence or of the Principal Place of Bu Richland | siness: | | | County of | Residence | e or of t | he Principal Plac | ce of Busi | ness: | | |
| Mailing Address of Debtor (if different from street | address) | | | Mailing A | ddress of | Joint De | ebtor (if differen | t from str | eet address): | | |
| | ZIPCOD | | | | | | | | ZIPCODE | | |
| Location of Principal Assets of Business Debtor (if | different fro | om stre | eet addres | s above): | | | | г | | | |
| T (D) | | | N T (| an : | | | CI (AD | | ZIPCODE | | |
| Type of Debtor (Form of Organization) | | | | of Business one box.) | | | _ | | Code Under Which (Check one box.) | | |
| (Check one box.) | □ Неа | alth Ca | re Busine | * | Chapter 7 Chapter 9 | | | _ | pter 15 Petition for | | |
| Individual (includes Joint Debtors) | | | | state as defined i | | | | Recognition of a Foreign | | | |
| See Exhibit D on page 2 of this form. ☐ Corporation (includes LLC and LLP) | l — | lroad | 101(51B) | | ☐ Chapter 11 Main Proceeding ☐ Chapter 12 ☐ Chapter 15 Petition for | | | | | | |
| Partnership | | ckbrok | | | Chapter 13 Recognition of a Foreign | | | | ognition of a Foreign | | |
| Other (If debtor is not one of the above entities, check this box and state type of entity below.) | Other (If debtor is not one of the above entities, | | | | | | | | nmain Proceeding | | |
| check this box and state type of entity below.) | | | | | | | Nature of (Check on | | | | |
| Chapter 15 Debtor | | | | | | ebts are primaril | y consume | | | | |
| | | | | mpt Entity | | | ots, defined in 1 | | business debts. | | |
| | | | | if applicable.) npt organization | under | | 01(8) as "incurr lividual primaril | - | | | |
| regarding, or against debtor is pending: Title 26 of the U1 | | | f the Unit | ed States Code (t | | per | sonal, family, or | | | | |
| Internal Revenue Code | | | ode). | | | ld purpose." | | | | | |
| Filing Fee (Check one box) | | | Check o | ne hov: | | Chaj | pter 11 Debtors | 3 | | | |
| Full Filing Fee attached | | | | or is a small busin | ness debte | or as def | fined in 11 U.S. | C. § 101(5 | 51D). | | |
| Filing Fee to be paid in installments (Applicable | o individua | ls | Debt | or is not a small b | ousiness d | lebtor as | s defined in 11 U | J.S.C. § 10 | 01(51D). | | |
| only). Must attach signed application for the cour | t's | | Check it | | | | | | | | |
| except in installments. Rule 1006(b). See Official Form 3A. than \$2,49 | | | 2,490,925 (amount | aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less 10,925 (amount subject to adjustment on 4/01/16 and every three years thereafter). | | | | | | | |
| | | | | pplicable boxes: | | | | | | | |
| consideration. See Official Form 3B. | | | ptances of the pla | being filed with this petition aces of the plan were solicited prepetition from one or more classes of creditors, in ce with 11 U.S.C. § 1126(b). | | | | | | | |
| Statistical/Administrative Information | | | accor | dance with 11 O. | 3.C. § 11 | 20(0). | | | THIS SPACE IS FOR | | |
| Debtor estimates that funds will be available for | distribution | n to un | secured c | reditors. | | | | | COURT USE ONLY | | |
| Debtor estimates that, after any exempt property is excluded and administrative expenses p | | | | | id, there v | will be n | o funds availabl | le for | | | |
| distribution to unsecured creditors. Estimated Number of Creditors | | | | | | | | | | | |
| | | 5,001- | | | | | | | | | |
| 1-49 50-99 100-199 200-999 1,0 | 00- | | | 10,001- | 001- 25,001- | | 50,001- | Over | | | |
| 5,0 | 00 | _10,000 | | 25,000 | 50,000 | | 100,000 100,0 | | - | | |
| Estimated Assets | | П | | П | | П | | | | | |
| \$0 to \$50,001 to \$100,001 to \$500,001 to \$1, | 000,001 to | | | \$50,000,001 to | \$100,000,001 | | \$500,000,001 | More tha | n | | |
| <u> </u> | million | | | \$100 million | | | million to \$1 billion | | 1 | | |
| Estimated Liabilities | | П | | П | | | | | | | |
| \$0 to \$50,001 to \$100,001 to \$500,001 to \$1, | 000,001 to | _ | 000,001 | \$50,000,001 to | \$100,00 | 0,001 | \$500,000,001 | _ | ın | | |
| | million | | | | | | to \$1 billion | \$1 billion | | | |

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| 1993-2013 EZ-Filing, Inc. [1-800 |
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| 1993-2013 EZ-Filing, Inc. [1-800 |

| Voluntary Petition (This page must be completed and filed in every case) | Name of Debtor(s): Ottolenghi, Diane | | | | |
|--|--|--------------------------------------|--|--|--|
| All Prior Bankruptcy Case Filed Within Last | t 8 Years (If more than two, attac | h additional sheet) | | | |
| Location Where Filed: None | Case Number: | Date Filed: | | | |
| Location Where Filed: | Case Number: | Date Filed: | | | |
| Pending Bankruptcy Case Filed by any Spouse, Partner or Affiliate of this Debtor (If more than one, attach additional sheet) | | | | | |
| Name of Debtor: None | Case Number: | Date Filed: | | | |
| District: | Relationship: | Judge: | | | |
| Exhibit A (To be completed if debtor is required to file periodic reports (e.g., forms 10K and 10Q) with the Securities and Exchange Commission pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 and is requesting relief under chapter 11.) Exhibit A is attached and made a part of this petition. | is required to file periodic reports (e.g., forms urities and Exchange Commission pursuant to be Securities Exchange Act of 1934 and is pter 11.) (To be completed if debtor is an individual whose debts are primarily consumer debts.) I, the attorney for the petitioner named in the foregoing petition, decented in the petitioner that [he or she] may proceed use that I have informed the petitioner that [he or she] may proceed use that I, united States Code, and he | | | | |
| | X /s/ Robert Goldberger | 4/22/14 | | | |
| Exhibit C Does the debtor own or have possession of any property that poses or is alleged to pose a threat of imminent and identifiable harm to public health or safety? Yes, and Exhibit C is attached and made a part of this petition. No | | | | | |
| Exhil (To be completed by every individual debtor. If a joint petition is filed, ea Exhibit D completed and signed by the debtor is attached and man If this is a joint petition: Exhibit D also completed and signed by the joint debtor is attached. | ach spouse must complete and attacked a part of this petition. | ch a separate Exhibit D.) | | | |
| Information Regardin | g the Debtor - Venue | | | | |
| | oplicable box.) of business, or principal assets in thi | is District for 180 days immediately | | | |
| ☐ There is a bankruptcy case concerning debtor's affiliate, general p | partner, or partnership pending in t | his District. | | | |
| Debtor is a debtor in a foreign proceeding and has its principal place of business or principal assets in the United States in this District, or has no principal place of business or assets in the United States but is a defendant in an action or proceeding [in a federal or state court] in this District, or the interests of the parties will be served in regard to the relief sought in this District. | | | | | |
| Certification by a Debtor Who Resides as a Tenant of Residential Property (Check all applicable boxes.) Landlord has a judgment against the debtor for possession of debtor's residence. (If box checked, complete the following.) | | | | | |
| (Name of landlord that obtained judgment) | | | | | |
| (Address o | f landlord) | | | | |
| | Debtor claims that under applicable nonbankruptcy law, there are circumstances under which the debtor would be permitted to cure the entire monetary default that gave rise to the judgment for possession, after the judgment for possession was entered, and | | | | |
| Debtor has included in this petition the deposit with the court of a filing of the petition. | any rent that would become due du | iring the 30-day period after the | | | |
| ☐ Debtor certifies that he/she has served the Landlord with this cert | ification. (11 U.S.C. § 362(1)). | | | | |

| B1 (Official Form 1) (04/13) | Page 3 |
|--|---|
| Voluntary Petition | Name of Debtor(s): Ottolenghi, Diane |
| (This page must be completed and filed in every case) | ottolengili, blane atures |
| | |
| Signature(s) of Debtor(s) (Individual/Joint) I declare under penalty of perjury that the information provided in this petition is true and correct. [If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under Chapter 7] I am aware that I may proceed under chapter 7, 11, 12 or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7. [If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. X /s/ Diane Ottolenghi Signature of Debtor Telephone Number (If not represented by attorney) April 22, 2014 Date | Signature of a Foreign Representative I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition. (Check only one box.) I request relief in accordance with chapter 15 of title 11, United States Code. Certified copies of the documents required by 11 U.S.C. § 1515 are attached. Pursuant to 11 U.S.C. § 1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached. X Signature of Foreign Representative Printed Name of Foreign Representative |
| Date Signature of Attorney* | Signature of Non-Attorney Petition Preparer |
| X /s/ Robert Goldberger Signature of Attorney for Debtor(s) Robert Goldberger 0022372 10 West Newlon Place Mansfield, OH 44902 (419) 524-5555 Fax: (419) 526-5515 goldberger.robert@yahoo.com | preparer as defined in 11 U.S.C. § 110; 2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h) and 342(b); and 3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19 is attached. Printed Name and title, if any, of Bankruptcy Petition Preparer Social Security Number (If the bankruptcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person or partner of the |
| April 22, 2014 | bankruptcy petition preparer.) (Required by 11 U.S.C. § 110.) |
| *In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect. *Signature of Debtor (Corporation/Partnership) I declare under penalty of perjury that the information provided in this | Address X |
| petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor. | Signature Date |
| The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition. | Signature of Bankruptcy Petition Preparer or officer, principal, responsible person, or partner whose social security number is provided above. |
| X Signature of Authorized Individual | Names and Social-Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual: |
| Printed Name of Authorized Individual | If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person. A bankruptcy petition preparer's failure to comply with the provisions of title 11 |
| Title of Authorized Individual | and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both 11 U.S.C. § 110; 18 U.S.C. § 156. |
| Date | |

United States Bankruptcy Court Northern District of Ohio

| IN RE: | Case No. |
|--|---|
| Ottolenghi, Diane | Chapter 7 |
| Debtor(s) EXHIBIT D - INDIVIDUAL DEBTOR'S S CREDIT COUNSELING | |
| Warning: You must be able to check truthfully one of the five staten do so, you are not eligible to file a bankruptcy case, and the court ca whatever filing fee you paid, and your creditors will be able to resuland you file another bankruptcy case later, you may be required to to stop creditors' collection activities. | nents regarding credit counseling listed below. If you cannot in dismiss any case you do file. If that happens, you will lose me collection activities against you. If your case is dismissed |
| Every individual debtor must file this Exhibit D. If a joint petition is filed, one of the five statements below and attach any documents as directed. | each spouse must complete and file a separate Exhibit D. Check |
| 1. Within the 180 days before the filing of my bankruptcy case , I refine United States trustee or bankruptcy administrator that outlined the operforming a related budget analysis, and I have a certificate from the age certificate and a copy of any debt repayment plan developed through the | opportunities for available credit counseling and assisted me in ency describing the services provided to me. Attach a copy of the |
| 2. Within the 180 days before the filing of my bankruptcy case , I refine United States trustee or bankruptcy administrator that outlined the operforming a related budget analysis, but I do not have a certificate from a copy of a certificate from the agency describing the services provided to the agency no later than 14 days after your bankruptcy case is filed. | opportunities for available credit counseling and assisted me in the agency describing the services provided to me. You must file |
| 3. I certify that I requested credit counseling services from an approved days from the time I made my request, and the following exigent circ requirement so I can file my bankruptcy case now. [Summarize exigent of the country of t | cumstances merit a temporary waiver of the credit counseling |
| | |
| If your certification is satisfactory to the court, you must still obtain you file your bankruptcy petition and promptly file a certificate from of any debt management plan developed through the agency. Failure case. Any extension of the 30-day deadline can be granted only for calso be dismissed if the court is not satisfied with your reasons for counseling briefing. | the agency that provided the counseling, together with a copy e to fulfill these requirements may result in dismissal of your ause and is limited to a maximum of 15 days. Your case may |
| 4. I am not required to receive a credit counseling briefing because of motion for determination by the court.] | : [Check the applicable statement.] [Must be accompanied by a |
| ☐ Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by rea of realizing and making rational decisions with respect to financi | |
| Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically imparticipate in a credit counseling briefing in person, by telephone Active military duty in a military combat zone. | |
| 5. The United States trustee or bankruptcy administrator has determinedoes not apply in this district. | ned that the credit counseling requirement of 11 U.S.C. § 109(h) |
| I certify under penalty of perjury that the information provided abo | ove is true and correct. |
| Signature of Debtor: /s/ Diane Ottolenghi | |
| Date: April 22, 2014 | |

United States Bankruptcy Court Northern District of Ohio

| IN RE: | | Case No |
|-------------------|-----------|-----------|
| Ottolenghi, Diane | | Chapter 7 |
| | Debtor(s) | • |

SUMMARY OF SCHEDULES

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors also must complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

| NAME OF SCHEDULE | ATTACHED (YES/NO) | NO. OF SHEETS | ASSETS | LIABILITIES | OTHER |
|--|----------------------|------------------|---------------|---------------|-------------|
| A - Real Property | Yes | 1 | \$ 240,000.00 | | |
| B - Personal Property | Yes | 3 | \$ 5,670.00 | | |
| C - Property Claimed as Exempt | Yes | 1 | | | |
| D - Creditors Holding Secured Claims | Yes | 1 | | \$ 280,500.00 | |
| E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E) | Yes | 1 | | \$ 0.00 | |
| F - Creditors Holding Unsecured Nonpriority Claims | Yes | 3 | | \$ 125,691.00 | |
| G - Executory Contracts and Unexpired Leases | Yes | 1 | | | |
| H - Codebtors | Yes | 1 | | | |
| I - Current Income of Individual Debtor(s) | Yes | 2 | | | \$ 1,223.33 |
| J - Current Expenditures of Individual Debtor(s) | Yes | 3 | | | \$ 3,211.25 |
| | TOTAL | 17 | \$ 245,670.00 | \$ 406,191.00 | |

United States Bankruptcy Court Northern District of Ohio

| IN RE: | Case No |
|-------------------|---------------------------------------|
| Ottolenghi, Diane | Chapter 7 |
| Debtor(s) | • |
| | ECAND DELATED DATA (2011 C.C. \$ 150) |

STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C. § 101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

This information is for statistical purposes only under 28 U.S.C. § 159.

Summarize the following types of liabilities, as reported in the Schedules, and total them.

| Type of Liability | Amount |
|---|-----------------|
| Domestic Support Obligations (from Schedule E) | \$ 0.00 |
| Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E) | \$ 0.00 |
| Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed) | \$ 0.00 |
| Student Loan Obligations (from Schedule F) | \$ 17,950.00 |
| Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E | \$ 0.00 |
| Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F) | \$ 0.00 |
| TOTAL | \$ 17,950.00 |

State the following:

| Average Income (from Schedule I, Line 12) | \$ 1,223.33 |
|---|----------------|
| Average Expenses (from Schedule J, Line 22) | \$ 3,211.25 |
| Current Monthly Income (from Form 22A Line 12; OR , Form 22B Line 11; OR , Form 22C | |
| Line 20) | \$ 520.00 |

State the following:

| 1. Total from Schedule D, "UNSECURED PORTION, IF ANY" column | | \$ 7,000.00 |
|--|------------|------------------|
| 2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column. | \$ 0.00 | |
| 3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column | | \$ 0.00 |
| 4. Total from Schedule F | | \$ 125,691.00 |
| 5. Total of non-priority unsecured debt (sum of 1, 3, and 4) | | \$ 132,691.00 |

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| | Case No. | |
|-----------|----------|------------|
| Debtor(s) | | (If known) |

SCHEDULE A - REAL PROPERTY

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether the husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim."

If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

| DESCRIPTION AND LOCATION OF PROPERTY | NATURE OF DEBTOR'S INTEREST IN PROPERTY | HUSBAND, WIFE, JOINT, OR COMMUNITY | CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION | AMOUNT OF SECURED CLAIM |
|---|--|---------------------------------------|--|----------------------------|
| 20 Otterbein Dr | | | 240,000.00 | 280,500.00 |
| Lexington, OH Situated in the Village of Lexington, County of Richland and State of Ohio: Being Lot Number One Thousand Four Hundred Sixty-eight (#1468 of the consecutively numbered lots in Clear Fork Hills, Section Three, Block "H", and of the consecutively numbered lots in said Village. Subject to the covenants and restrictions recorded in Volume 21, page 479, Richland County, Ohio. Records supplementary the Covenants and Restrictions recorded in Deed Volume 690, Page 520 of the Richland County, Ohio Records, and matter set forth in Plat Volume 25, Page 116. PP# 408-27-125-17-074 | | | | |
| | | | | |

TOTAL

240,000.00

(Report also on Summary of Schedules)

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| | Case No. | |
|-----------|----------|------------|
| Debtor(s) | | (If known) |

SCHEDULE B - PERSONAL PROPERTY

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether the husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

| | TYPE OF PROPERTY | N O N E | DESCRIPTION AND LOCATION OF PROPERTY | HUSBAND, WIFE, JOINT, OR COMMUNITY | CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION |
|-----|---|------------------|--------------------------------------|---------------------------------------|--|
| 1. | Cash on hand. | Х | | | |
| 2. | Checking, savings or other financial accounts, certificates of deposit or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives. | | Richland Bank Checking Account | | 20.00 |
| 3. | Security deposits with public utilities, telephone companies, landlords, and others. | Х | | | |
| 4. | Household goods and furnishings, include audio, video, and computer equipment. | | Household goods | | 2,000.00 |
| 5. | Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles. | X | | | |
| 6. | Wearing apparel. | | Wearing Apparel | | 150.00 |
| 7. | Furs and jewelry. | Х | | | |
| 8. | Firearms and sports, photographic, and other hobby equipment. | Х | | | |
| 9. | Interest in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each. | Х | | | |
| 10. | Annuities. Itemize and name each issue. | Х | | | |
| 11. | Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).) | X | | | |
| 12. | Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars. | Х | | | |
| 13. | Stock and interests in incorporated and unincorporated businesses. Itemize. | Х | | | |
| 14. | Interests in partnerships or joint ventures. Itemize. | Х | | | |
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| Case | No. |
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(If known)

SCHEDULE B - PERSONAL PROPERTY (Continuation Sheet)

| | TYPE OF PROPERTY | N O N E | DESCRIPTION AND LOCATION OF PROPERTY | HUSBAND, WIFE, JOINT, OR COMMUNITY | CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION |
|-----|---|------------------|--------------------------------------|---------------------------------------|--|
| 15. | Government and corporate bonds and other negotiable and non-negotiable instruments. | X | | | |
| 16. | Accounts receivable. | X | | | |
| 17. | Alimony, maintenance, support, and property settlements in which the debtor is or may be entitled. Give particulars. | X | | | |
| 18. | Other liquidated debts owed to debtor including tax refunds. Give particulars. | X | | | |
| 19. | Equitable or future interest, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property. | X | | | |
| 20. | Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust. | X | | | |
| 21. | Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each. | X | | | |
| 22. | Patents, copyrights, and other intellectual property. Give particulars. | X | | | |
| 23. | Licenses, franchises, and other general intangibles. Give particulars. | X | | | |
| 24. | Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes. | X | | | |
| 25. | Automobiles, trucks, trailers, and other vehicles and accessories. | | 2006 Ford Focus | | 3,500.00 |
| 26. | Boats, motors, and accessories. | X | | | |
| 27. | Aircraft and accessories. | X | | | |
| 28. | Office equipment, furnishings, and supplies. | X | | | |
| 29. | Machinery, fixtures, equipment, and supplies used in business. | X | | | |
| 30. | Inventory. | X | | | |
| | Animals. | X | | | |
| | Crops - growing or harvested. Give particulars. | X | | | |
| I | Farming equipment and implements. | X | | | |
| 34. | Farm supplies, chemicals, and feed. | Х | | | |

IN RE Ottolenghi, Diane

_____ Case No. ___

Debtor(s)

(If known)

SCHEDULE B - PERSONAL PROPERTY (Continuation Sheet)

| TYPE OF PROPERTY | N O N E | DESCRIPTION AND LOCATION OF PROPERTY | HUSBAND, WIFE, JOINT, OR COMMUNITY | CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION |
|--|------------------|--------------------------------------|---------------------------------------|--|
| 25 Other menoral manager 6 11 1 | Х | | Н | |
| 35. Other personal property of any kind not already listed. Itemize. | ^ | | | |
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0 continuation sheets attached

(Include amounts from any continuation sheets attached. Report total also on Summary of Schedules.)

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SCHEDULE C - PROPERTY CLAIMED AS EXEMPT

| Debtor elects | the exemptions | to which | debtor is | entitled | under: |
|-----------------|----------------|----------|-----------|----------|--------|
| (Check one box) | = | | | | |

Check if debtor claims a homestead exemption that exceeds \$155,675. *

11 U.S.C. § 522(b)(2) 11 U.S.C. § 522(b)(3)

| DESCRIPTION OF PROPERTY | SPECIFY LAW PROVIDING EACH EXEMPTION | VALUE OF CLAIMED EXEMPTION | CURRENT VALUE OF PROPERTY WITHOUT DEDUCTING EXEMPTIONS |
|--------------------------------|--------------------------------------|----------------------------|--|
| SCHEDULE B - PERSONAL PROPERTY | | | |
| Richland Bank Checking Account | R.C. § 2329.66(A)(3) | 450.00 | 20.00 |
| Household goods | R.C. § 2329.66(A)(4)(a) | 12,250.00 | 2,000.00 |
| Wearing Apparel | R.C. § 2329.66(A)(3) | 150.00 | 150.00 |
| 2006 Ford Focus | R.C. § 2329.66(A)(2) | 3,675.00 | 3,500.00 |
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^{*} Amount subject to adjustment on 4/1/16 and every three years thereafter with respect to cases commenced on or after the date of adjustment.

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| C Ottolenghi, Diane | | Case No. | |
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SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is the creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Amount of Claim Without Deducting Value of Collateral" also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion, if Any" on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

| CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND ACCOUNT NUMBER. (See Instructions Above.) | CODEBTOR | HUSBAND, WIFE, JOINT, OR COMMUNITY | DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN | CONTINGENT | UNLIQUIDATED | DISPUTED | AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL | UNSECURED PORTION, IF ANY |
|--|----------|---------------------------------------|--|------------|--------------|----------|---|------------------------------|
| ACCOUNT NO. | | | Mortgage on Otterbein Dr | T | | | 8,375.00 | |
| Jem Home Solutions 2012 E Perkins Ave, #152 Sandusky, OH 44870 | | | VALUE \$ 240,000,00 | | | | | |
| ACCOUNT NO. | | | VALUE \$ 240,000.00 Lien on Otterbein Dr | + | \vdash | | 4,355.00 | |
| Midland IRA 1355 LaSalle St, Chicago, IL 60603 | | | Lien on otterbein bi | | | | 4,000.00 | |
| | | | VALUE \$ 240,000.00 | | | | | |
| ACCOUNT NO. Richland Bank PO Box 355 Mansfield, OH 44901 | | | Otterbein Dr, Lexington, Ohio | | | | 247,000.00 | 7,000.00 |
| mansheid, orr 44001 | | | | | Ì | | | |
| | 1 | | VALUE \$ 240,000.00 | ╀ | ╙ | | | |
| ACCOUNT NO. Sara Jones Borstock 126 Old Rudy York Rd NW Cartersville, GA 30121 | | | Lien on Otterbein Dr | | | | 20,770.00 | |
| | | | VALUE \$ 240,000.00 | | | | | |
| continuation sheets attached | | | (Total of t | | otot | | \$ 280,500.00 | \$ 7,000.00 |
| | | | (Use only on l | | Tota page | | \$ 280,500.00 | \$ 7,000.00 |

(Report also on Summary of Schedules.)

(If applicable, report also on Statistical Summary of Certain Liabilities and Related

0 continuation sheets attached

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Case No. Debtor(s)

(If known)

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

| liste | eport the total of amounts <u>not</u> entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to priority d on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on Statistical Summary of Certain Liabilities and Related Data. |
|--------------|---|
| \checkmark | Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E. |
| TY | PES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets) |
| | Domestic Support Obligations Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1). |
| | Extensions of credit in an involuntary case Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(3). |
| | Wages, salaries, and commissions Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$12,475* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4). |
| | Contributions to employee benefit plans Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5). |
| | Certain farmers and fishermen Claims of certain farmers and fishermen, up to \$6,150* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6). |
| | Deposits by individuals Claims of individuals up to \$2,775* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7). |
| | Taxes and Certain Other Debts Owed to Governmental Units Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8). |
| | Commitments to Maintain the Capital of an Insured Depository Institution Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507 (a)(9). |
| | Claims for Death or Personal Injury While Debtor Was Intoxicated Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10). |
| | * Amounts are subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment. |

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| | Debtor(s) | | (If known) |

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding unsecured nonpriority claims to report on this Schedule F.

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|--|----------|---------------------------------------|---|---------------|--------------|----------|-----------------------|
| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.) | CODEBTOR | HUSBAND, WIFE, JOINT, OR COMMUNITY | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE | CONTINGENT | UNLIQUIDATED | DISPUTED | AMOUNT OF CLAIM |
| ACCOUNT NO. 4851 | | | Collection Account | | | T | |
| Allied Interstate PO Box 15548 Wilmington, DE 19886 | | | | | | | 13,925.00 |
| ACCOUNT NO. 7850 | T | | Credit Card | П | | T | , |
| Bank Of America PO Box 15019 Wilmington, DE 19886 | | | | | | | 15,785.00 |
| ACCOUNT NO. 0701 | 1 | | Credit Card | | | \top | |
| Bank Of America PO Box 15019 Wilmington, DE 19886 | | | | | | | 11,975.00 |
| ACCOUNT NO. 8074 | T | | Credit Card | | | T | |
| Capital One PO Box 70886 Charlotte, NC 28272 | | | | | | | 2,675.00 |
| 2 | | | | Subt | | - 1 | |
| 2 continuation sheets attached | | | (Total of th | | age Tota | | 44,360.00 |
| | | | (Use only on last page of the completed Schedule F. Report the Summary of Schedules and, if applicable, on the St Summary of Certain Liabilities and Relate | also atist | o oı tica | n ıl | 5 |

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SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

| | | (1 | Continuation Sheet) | | | | |
|--|----------|---------------------------------------|--|------------|--------------------|--------------|---------------------------|
| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.) | CODEBTOR | HUSBAND, WIFE, JOINT, OR COMMUNITY | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE | CONTINGENT | UNLIQUIDATED | DISPUTED | AMOUNT OF CLAIM |
| ACCOUNT NO. 6635 | | | Credit Card | H | | | |
| Capital One PO Box 30285 Salt Lake City, UT 84130 | | | | | | | 32,100.00 |
| ACCOUNT NO. 0713 | | | Credit Card | | | | , |
| Chase PO Box 15153 Wilmington, DE 19886 | | | | | | | 10,575.00 |
| ACCOUNT NO. 3617 | | | Credit Card | Н | | \dashv | 10,010.00 |
| Citi PO Box 6286 Sioux Falls, SD 57117 | - | | | | | | unknown |
| ACCOUNT NO. | | | Credit Card | Н | | \dashv | unanown |
| Credit One Bank PO Box 98873 Las Vegas, NV 89193 | | | | | | | |
| 0075 | | | Credit Card | | | \dashv | 600.00 |
| ACCOUNT NO. 9875 Home Depot PO Box 182676 Columbus, OH 43218 | | | Credit Card | | | | 12 925 00 |
| A COOLINE NO | | | Student Loan | H | | | 13,825.00 |
| Mohela Dept Of Education 633 Spirit Dr Chesterfield, MO 63005 | _ | | Student Loan | | | | |
| Lagger Native 2647 | - | | Cradit Card | Н | | \dashv | 17,950.00 |
| ACCOUNT NO. 3617 Sears PO Box 183082 Columbus, OH 43210 | | | Credit Card | | | | E 200 00 |
| Sheet no1 of2 continuation sheets attached to | <u> </u> | | | Sub | | | 5,300.00 |
| Schedule of Creditors Holding Unsecured Nonpriority Claims | | | (Total of the (Use only on last page of the completed Schedule F. Report the Summary of Schedules, and if applicable, on the Summary of Certain Liabilities and Relate | T als | ota o o tica | ս n ւվ | \$ 80,350.00 \$ |

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SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

| | | (| Continuation Sheet) | | | | |
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| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.) | CODEBTOR | HUSBAND, WIFE, JOINT, OR COMMUNITY | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE | CONTINGENT | UNLIQUIDATED | DISPUTED | AMOUNT OF CLAIM |
| ACCOUNT NO. | | | Prior Bankruptcy Filing Fee | П | | | |
| US Bankruptcy Court 401 McKinley Ave SW Canton, OH 44702 | | | | | | | 306.00 |
| ACCOUNT NO. 2765 | | | Credit Card | Н | | \forall | 000.00 |
| Value City Bankruptcy Dept PO Box 182125 Columbus, OH 43218 | | | orean oura | | | | 675.00 |
| ACCOUNT NO. | | | | | | | |
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| ACCOUNT NO. | | | | | | | |
| Sheet no. 2 of 2 continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims | | | (Total of th | | age |) | \$ 981.00 |
| | | | (Use only on last page of the completed Schedule F. Report the Summary of Schedules, and if applicable, on the St Summary of Certain Liabilities and Relate | als atis | tica | n al | \$ 125,691.00 |

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SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser," "Agent," etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

✓ Check this box if debtor has no executory contracts or unexpired leases.

| NAME AND MAILING ADDRESS, INCLUDING ZIP CODE OF OTHER PARTIES TO LEASE OR CONTRACT | DESCRIPTION OF CONTRACT OR LEASE AND NATURE OF DEBTOR'S INTEREST. STATE WHETHER LEASE IS FOR NONRESIDENTIAL REAL PROPERTY. STATE CONTRACT NUMBER OF ANY GOVERNMENT CONTRACT. |
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SCHEDULE H - CODEBTORS

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by the debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight-year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

Check this box if debtor has no codebtors.

| NAME AND ADDRESS OF CODEBTOR | NAME AND ADDRESS OF CREDITOR |
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| Debtor 1 Diane Ottolenghi First Name | Middle Name | Last Name | | - | |
| Debtor 2 (Spouse, if filing) First Name | Middle Name | Last Name | | | |
| United States Bankruptcy Court for the: I | | | | | |
| Case number | | | | Check if th | nis is: |
| (If known) | | | | ☐ An ame | ended filing |
| | | | | • | element showing post-petition r 13 income as of the following date: |
| Official Form 6l | | | | | |
| Schedule I: You | ır Income | | | IVIIVI / DI | 12/13 |
| supplying correct information. If yo | ou are married and not f use is not filing with you top of any additional pa | iling jointly, and yo , do not include inf | ur sp orma | ouse is living with yetion about your spou | r 2), both are equally responsible for ou, include information about your spouse use. If more space is needed, attach a nown). Answer every question. |
| | | | | | |
| Fill in your employment information. | | Debtor 1 | | | Debtor 2 or non-filing spouse |
| If you have more than one job, attach a separate page with information about additional employers. | Employment status | Employed Not employ | ed | | Employed Not employed |
| Include part-time, seasonal, or self-employed work. | Occupation | Interim Food | Pant | ry Director | |
| Occupation may Include student or homemaker, if it applies. | Occupation | internit i ood | · unc | Ty Director | |
| | Employer's name | Grace Episco | pal (| Church | |
| | Employer's address | 41 Bowman St Number Street | <u>:</u> | | Number Street |
| | | Mansfield,, Ol | H 00 | | City State ZIP Code |
| | How long employed th | ere? 1 months | | | |
| | | | | | |
| Part 2: Give Details About | Monthly Income | | | | |
| Estimate monthly income as of spouse unless you are separated | | rm. If you have noth | ing to | report for any line, wr | ite \$0 in the space. Include your non-filing |
| If you or your non-filing spouse had below. If you need more space, a | | | ormati | on for all employers fo | or that person on the lines |
| | | | | For Debtor 1 | For Debtor 2 or non-filing spouse |
| List monthly gross wages, sale deductions). If not paid monthly, | | | 2. | \$780.00 | \$ |
| 3. Estimate and list monthly over | rtime pay. | | 3. | +\$0.00 | + \$ |

Official Form 6l Schedule 1: Your Income page 1

4. Calculate gross income. Add line 2 + line 3.

page 2

| | | For | Debtor 1 | For Debtor 2 or non-filing spouse | |
|---|------------|---------|------------------|-----------------------------------|------------------------|
| Copy line 4 here | 4 . | \$ | 780.00 | \$ | |
| 5. List all payroll deductions: | | | | | |
| 5a. Tax, Medicare, and Social Security deductions | 5a. | \$ | 106.67 | \$ | |
| 5b. Mandatory contributions for retirement plans | 5b. | \$ | 0.00 | \$ | |
| 5c. Voluntary contributions for retirement plans | 5c. | \$ | 0.00 | \$ | |
| 5d. Required repayments of retirement fund loans | 5d. | \$ | 0.00 | \$ | |
| 5e. Insurance | 5e. | \$ | 0.00 | \$ | |
| 5f. Domestic support obligations | 5f. | \$ | 0.00 | \$ | |
| 5g. Union dues | 5g. | \$ | 0.00 | \$ | |
| 5h. Other deductions. Specify: | 5h. | +\$ | 0.00 | + \$ | |
| 6. Add the payroll deductions . Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g +5h. | 6. | \$ | 106.67 | \$ | |
| 7. Calculate total monthly take-home pay. Subtract line 6 from line 4. | 7. | \$ | 673.33 | \$ | |
| 8. List all other income regularly received: | | | | | |
| 8a. Net income from rental property and from operating a business, profession, or farm | | | | | |
| Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. | 8a. | \$ | 550.00 | \$ | |
| 8b. Interest and dividends | 8b. | \$ | 0.00 | \$ | |
| 8c. Family support payments that you, a non-filing spouse, or a depende regularly receive | ent | | | | |
| Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. | 8c. | \$ | 0.00 | \$ | |
| 8d. Unemployment compensation | 8d. | \$ | 0.00 | \$ | |
| 8e. Social Security | 8e. | \$ | 0.00 | \$ | |
| 8f. Other government assistance that you regularly receive | | | | | |
| Include cash assistance and the value (if known) of any non-cash assistant that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. | | \$ | 0.00 | \$ | |
| Specify: | 8f. | | | | |
| 8g. Pension or retirement income | 8g. | \$ | 0.00 | \$ | |
| 8h. Other monthly income. Specify: | 8h. | +\$ | 0.00 | +\$ | |
| 9. Add all other income . Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h. | 9. | \$ | 550.00 | \$ | |
| 10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. | 10. | \$ | 1,223.33 + | \$= | = \$1,223.33_ |
| 11. State all other regular contributions to the expenses that you list in Scheol Include contributions from an unmarried partner, members of your household, yother friends or relatives. | | | ents, your roomr | nates, and | |
| Do not include any amounts already included in lines 2-10 or amounts that are | not av | ailable | to pay expense | es listed in Schedule J. | |
| Specify: | | | | _ 11. | + \$0.00 |
| 12. Add the amount in the last column of line 10 to the amount in line 11. The Write that amount on the Summary of Schedules and Statistical Summary of C | | | | • | \$1,223.33 Combined |
| 13. Do you expect an increase or decrease within the year after you file this form. No. None None | form? | | | | monthly income |

Official Form 6I Schedule I: Your Income

| Fi | ll in this ir | formation to identify | our case: | | | | |
|---------------|--------------------------|---|--|----------------------------|----------------------|-----------------------------------|---------------------|
| De | ebtor 1 | Diane Ottolenghi | Middle Nove | | Check if this is: | | |
| | ebtor 2 | | Middle Name Last Name | | ☐ An amended f | ilina | |
| | pouse, if filing) | | Middle Name Last Name | | | • | petition chapter 13 |
| Ur | nited States I | Bankruptcy Court for the: N | lorthern District of Ohio | | expenses as o | of the following | date: |
| | ase number known) | | | | MM / DD / YYYY | | |
| | | | | | | ng for Debtor 2 eparate househ | because Debtor 2 |
| <u>O</u> 1 | fficial F | Form 6J | | | mamamo a se | parato no doon | |
| S | ched | ule J: You | ır Expenses | | | | 12/13 |
| info | ormation. I | | ssible. If two married people are fili d, attach another sheet to this form | | | | |
| Pa | rt 1: | Describe Your Hous | sehold | | | | |
| 1. İ S | s this a joi | nt case? | | | | | |
| 5 | No. Go | to line 2. es Debtor 2 live in a s | eparate household? | | | | |
| _ | | No | | | | | |
| | | | a separate Schedule J. | | | | |
| 2. C | o you hav | e dependents? | ▼ No | Dependent's relati | ons hin to | De pendent's | Does dependent live |
| | Oo not list Debtor 2. | ebtor 1 and | Yes. Fill out this information for | Debtor 1 or Debtor | | age | with you? |
| | | the dependents' | each dependent | | | | □ No |
| | ames. | and dependent | | | | | Yes |
| | | | | | | | ☐ No ☐ Yes |
| | | | | | | | □ No |
| | | | | | | | Yes |
| | | | | | | | ☐ No |
| | | | | | | | ☐ Yes |
| | | | | | | | ☐ No ☐ Yes |
| | | penses include | ✓ No | | | ı | □ Yes |
| | | of people other than d your dependents? | Yes | | | | |
| Par | t 2: Es | timate Your Ongoir | ng Monthly Expenses | | | | |
| | _ | | bankruptcy filing date unless you a | = | | - | |
| _ | enses as o licable da | | kruptcy is filed. If this is a suppleme | ental S <i>chedul</i> e J, | check the box at the | top of the form | and fill in the |
| • • • | | | -cash government assistance if you | know the value o | of | | |
| suc | h assistar | ce and have included | it on Schedule I: Your Income (Office | cial Form 6l.) | | Your exper | nses |
| | | or home ownership ear the ground or lot. | xpenses for your residence. Include | first mortgage pay | ments and 4. | \$ <u>1,425</u> | 5.00 |
| | If not inclu | uded in line 4: | | | | | |
| | 4a. Real | estate taxes | | | 4a. | \$ <u>130</u> | |
| | · | erty, homeowner's, or re | | | 4b. | \$ <u>75.</u> | |
| | | e maintenance, repair, a | | | 4c. | \$ <u>45.</u> | |
| | 4d. Home | eowner's association or | condominium dues | | 4d. | \$6.2 | 25 |

| Diane | Ottolenghi | | |
|-----------|-------------|-----------|--|
| irst Name | Middle Name | Last Name | |

| | | You | ır expenses |
|---|------|-----|-------------|
| 5. Additional mortgage payments for your residence, such as home equity loans | 5. | \$ | 205.00 |
| 6. Utilities: | | | |
| 6a. Electricity, heat, natural gas | 6a. | \$ | 0.00 |
| 6b. Water, sewer, garbage collection | 6b. | \$ | 0.00 |
| 6c. Telephone, cell phone, Internet, satellite, and cable services | 6c. | \$ | 65.00 |
| 6d. Other. Specify: | 6d. | \$ | 0.00 |
| 7. Food and housekeeping supplies | 7. | \$ | 275.00 |
| 8. Childcare and children's education costs | 8. | \$ | 0.00 |
| 9. Clothing, laundry, and dry cleaning | 9. | \$ | 0.00 |
| 0. Personal care products and services | 10. | \$ | 0.00 |
| 11. Medical and dental expenses | 11. | \$ | 600.00 |
| Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. | 12. | \$ | 150.00 |
| 3. Entertainment, clubs, recreation, newspapers, magazines, and books | 13. | \$ | 0.00 |
| 4. Charitable contributions and religious donations | 14. | \$ | 0.00 |
| Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. | | | |
| 15a. Life insurance | 15a. | \$ | 0.00 |
| 15b. Health insurance | 15b. | \$ | 95.00 |
| 15c. Vehicle insurance | 15c. | \$ | 140.00 |
| 15d. Other insurance. Specify: | 15d. | \$ | 0.00 |
| 6. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: | 16. | \$ | 0.00 |
| 17. Installment or lease payments: | | | |
| 17a. Car payments for Vehicle 1 | 17a. | \$ | 0.00 |
| 17b. Car payments for Vehicle 2 | 17b. | \$ | 0.00 |
| 17c. Other. Specify: | 17c. | \$ | 0.00 |
| 17d. Other. Specify: | 17d. | \$ | 0.00 |
| Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 6I). | 18. | \$ | 0.00 |
| 19. Other payments you make to support others who do not live with you. | | \$ | 0.00 |
| Specify: | 19. | | |
| 20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Incom | ne. | | |
| 20a. Mortgages on other property | 20a. | \$ | 0.00 |
| 20b. Real estate taxes | 20b. | \$ | 0.00 |
| 20c. Property, homeowner's, or renter's insurance | 20c. | \$ | 0.00 |
| 20d. Maintenance, repair, and upkeep expenses | 20d. | \$ | 0.00 |
| 20e. Homeowner's association or condominium dues | 20e. | \$ | 0.00 |

| Debtor 1 Diane Ottolenghi First Name Middle Name Last Name | Case number (if known) |
|--|------------------------------------|
| 21. Other. Specify: | |
| Your monthly expenses. Add lines 4 through 21. The result is your monthly expenses. | \$ |
| 23. Calculate your monthly net income.23a. Copy line 12 (your combined monthly income) from Schedule I. | _{23a.} \$ <u>1,223.33</u> |

23b. Copy your monthly expenses from line 22 above.

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

No.

Yes.

None

3,211.25

| Case No. | |
|----------|------------|
| | (If known) |

DECLARATION CONCERNING DEBTOR'S SCHEDULES

DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR I declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of ______19 sheets, and that they are true and correct to the best of my knowledge, information, and belief. Date: April 22, 2014 Signature: /s/ Diane Ottolenghi Debtor Diane Ottolenghi Signature: (Joint Debtor, if any) [If joint case, both spouses must sign.] DECLARATION AND SIGNATURE OF NON-ATTORNEY BANKRUPTCY PETITION PREPARER (See 11 U.S.C. § 110) I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342 (b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required by that section. Printed or Typed Name and Title, if any, of Bankruptcy Petition Preparer Social Security No. (Required by 11 U.S.C. § 110.) If the bankruptcy petition preparer is not an individual, state the name, title (if any), address, and social security number of the officer, principal, responsible person, or partner who signs the document. Address Signature of Bankruptcy Petition Preparer Date Names and Social Security numbers of all other individuals who prepared or assisted in preparing this document, unless the bankruptcy petition preparer is not an individual: If more than one person prepared this document, attach additional signed sheets conforming to the appropriate Official Form for each person. A bankruptcy petition preparer's failure to comply with the provision of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. § 110; 18 U.S.C. § 156. DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF CORPORATION OR PARTNERSHIP (the president or other officer or an authorized agent of the corporation or a member or an authorized agent of the partnership) of the ___ (corporation or partnership) named as debtor in this case, declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of _____ sheets (total shown on summary page plus 1), and that they are true and correct to the best of my knowledge, information, and belief.

(Print or type name of individual signing on behalf of debtor)

[An individual signing on behalf of a partnership or corporation must indicate position or relationship to debtor.]

Penalty for making a false statement or concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. §§ 152 and 3571.

Richland Bank

United States Bankruptcy Court Northern District of Ohio

| IN RE: | | Case No |) |
|--|--|---|--|
| Ottolenghi, Diane | | Chapter | 7 |
| | Debtor(s) | | |
| | STATEMENT OF | FINANCIAL AFFAIRS | |
| is combined. If the case is filed under is filed, unless the spouses are separar farmer, or self-employed professional, personal affairs. To indicate payments | chapter 12 or chapter 13, a married ted and a joint petition is not filed. , should provide the information req s, transfers and the like to minor chi | at petition may file a single statement on we debtor must furnish information for both: An individual debtor engaged in busines quested on this statement concerning all surldren, state the child's initials and the narrelisclose the child's name. See, 11 U.S.C. | spouses whether or not a joint petitions as a sole proprietor, partner, family ach activities as well as the individual me and address of the child's parent |
| 25. If the answer to an applicable q | uestion is "None," mark the box | or have been in business, as defined below labeled "None." If additional space is not ase number (if known), and the number of | eeded for the answer to any question |
| | DEF | TINITIONS | |
| for the purpose of this form if the deb an officer, director, managing executi partner, of a partnership; a sole propri form if the debtor engages in a trade, b "Insider." The term "insider" include which the debtor is an officer, director | otor is or has been, within six years in ve, or owner of 5 percent or more of the enter or self-employed full-time or process, or other activity, other than des but is not limited to: relatives of or, or person in control; officers, d | the debtor is a corporation or partnership. Immediately preceding the filing of this but the voting or equity securities of a corporart-time. An individual debtor also may but as an employee, to supplement income from the debtor; general partners of the debtor irectors, and any persons in control of an of the debtor. 11 U.S.C. § 101(2),(31). | pankruptcy case, any of the following oration; a partner, other than a limit be "in business" for the purpose of the form the debtor's primary employment or and their relatives; corporations a corporate debtor and their relatives. |
| 1. Income from employment or open | ration of business | | |
| including part-time activities e case was commenced. State al maintains, or has maintained, beginning and ending dates of | ither as an employee or in independ so the gross amounts received du financial records on the basis of a the debtor's fiscal year.) If a joint po | employment, trade, or profession, or from dent trade or business, from the beginning ring the two years immediately precedifiscal rather than a calendar year may restition is filed, state income for each spoos whether or not a joint petition is filed, up to the complex of t | g of this calendar year to the date the ng this calendar year. (A debtor the eport fiscal year income. Identify the use separately. (Married debtors film |
| AMOUNT SOURCE 21,587.00 2012 Wages | 3 | | |
| 2,300.00 2014 Incom | <u>e</u> | | |
| 2. Income other than from employn | aent or operation of business | | |
| two years immediately preced | ling the commencement of this casting under chapter 12 or chapter 13 | n employment, trade, profession, operation is se. Give particulars. If a joint petition is must state income for each spouse whether | s filed, state income for each spou |
| 3. Payments to creditors Complete a. or b., as appropriate, an | nd c. | | |
| None a. Individual or joint debtor(s) debts to any creditor made with constitutes or is affected by suc a domestic support obligation counseling agency. (Married de | with primarily consumer debts: Li hin 90 days immediately preceding th transfer is less than \$600. Indica or as part of an alternative repay | st all payments on loans, installment pure the commencement of this case unless the te with an asterisk (*) any payments that a ment schedule under a plan by an appra apter 13 must include payments by either ion is not filed.) | ne aggregate value of all property the were made to a creditor on account roved nonprofit budgeting and creater |
| NAME AND ADDRESS OF CREDI | TOR DATES O | F PA YMENTS | AMOUNT AMOUN |

0.00

4,200.00

PO Box 355 Mansfield, OH 44901-0000

b. Debtor whose debts are not primarily consumer debts: List each payment or other transfer to any creditor made within 90 days immediately preceding the commencement of the case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$6,255.* If the debtor is an individual, indicate with an asterisk (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments and other transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

* Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

c. All debtors: List all payments made within one year immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

4. Suits and administrative proceedings, executions, garnishments and attachments

a. List all suits and administrative proceedings to which the debtor is or was a party within **one year** immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

b. Describe all property that has been attached, garnished or seized under any legal or equitable process within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

5. Repossessions, foreclosures and returns

None List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

6. Assignments and receiverships

a. Describe any assignment of property for the benefit of creditors made within 120 days immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and joint petition is not filed.)

b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

7. Gifts

List all gifts or charitable contributions made within one year immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

8. Losses

List all losses from fire, theft, other casualty or gambling within one year immediately preceding the commencement of this case or since the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

9. Payments related to debt counseling or bankruptcy

List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of a petition in bankruptcy within one year immediately preceding the commencement of this case.

NAME AND ADDRESS OF PAYEE **Robert Goldberger** 10 West Newlon Place Mansfield, OH 44902-0000

DATE OF PAYMENT. NAME OF PAYOR IF OTHER THAN DEBTOR 2/2014

AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY 500.00

10. Other transfers

None a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within two years immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

None b. List all property transferred by the debtor within **ten years** immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary.

11. Closed financial accounts

List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within one year immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

12. Safe deposit boxes

None List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

13. Setoffs

List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within 90 days preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

14. Property held for another person

List all property owned by another person that the debtor holds or controls.



15. Prior address of debtor

If debtor has moved within three years immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

ADDRESS

20 Otterbien Dr, Lexington, OH

NAME USED Same

DATES OF OCCUPANCY

2/11-10/13

16. Spouses and Former Spouses

None If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within eight years immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

17. Environmental Information

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law.



a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law.

None b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

None c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

18. Nature, location and name of business

None a. If the debtor is an individual, list the names, addresses, taxpaver-identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partner in a partnership, sole proprietor, or was self-employed in a trade, profession, or other activity either full- or part-time within six years immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within six years immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within six years immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within six years immediately preceding the commencement of this case.

> LAST FOUR DIGITS OF SOCIAL-SECURITY OR OTHER **INDIVIDUAL** TAXPAYER-I.D. NO.

NAME **UR Problems Solved Inc** (ITIN)/COMPLETE EIN

ADDRESS 46-1030993 Same As Debtors NATURE OF BUSINESS **Real Estate**

BEGINNING AND ENDING DATES 8/23/12-present

Rehab

b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

 \checkmark

The following questions are to be completed by every debtor that is a corporation or partnership and by any individual debtor who is or has been, within six years immediately preceding the commencement of this case, any of the following: an officer, director, managing executive, or owner of more than 5 percent of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership, a sole proprietor, or self-employed in a trade, profession, or other activity, either full- or part-time.

(An individual or joint debtor should complete this portion of the statement only if the debtor is or has been in business, as defined above, within the six years immediately preceding the commencement of this case. A debtor who has not been in business within those six years should go directly to the signature page.)

19. Books, records and financial statements

a. List all bookkeepers and accountants who within the two years immediately preceding the filing of this bankruptcy case kept or supervised the keeping of books of account and records of the debtor.

b. List all firms or individuals who within the two years immediately preceding the filing of this bankruptcy case have audited the books of account and records, or prepared a financial statement of the debtor.

c. List all firms or individuals who at the time of the commencement of this case were in possession of the books of account and records of the debtor. If any of the books of account and records are not available, explain.

d. List all financial institutions, creditors, and other parties, including mercantile and trade agencies, to whom a financial statement was issued by the debtor within the **two years** immediately preceding the commencement of this case.

20. Inventories

a. List the dates of the last two inventories taken of your property, the name of the person who supervised the taking of each inventory, and the dollar amount and basis of each inventory.

b. List the name and address of the person having possession of the records of each of the two inventories reported in a., above.

 \checkmark

| 21. Cu | urrent Partners, Officers, Directors and Shareholders |
|--------|--|
| None | a. If the debtor is a partnership, list the nature and percentage of partnership interest of each member of the partnership. |
| | b. If the debtor is a corporation, list all officers and directors of the corporation, and each stockholder who directly or indirectly owns, controls, or holds 5 percent or more of the voting or equity securities of the corporation. |

22. Former partners, officers, directors and shareholders

None a. If the debtor is a partnership, list each member who withdrew from the partnership within **one year** immediately preceding the commencement of this case.

None b. If the debtor is a corporation, list all officers, or directors whose relationship with the corporation terminated within **one year** immediately preceding the commencement of this case.

23. Withdrawals from a partnership or distributions by a corporation

None If the debtor is a partnership or corporation, list all withdrawals or distributions credited or given to an insider, including compensation in any form, bonuses, loans, stock redemptions, options exercised and any other perquisite during **one year** immediately preceding the commencement of this case.

24. Tax Consolidation Group

None If the debtor is a corporation, list the name and federal taxpayer identification number of the parent corporation of any consolidated group for tax purposes of which the debtor has been a member at any time within **six years** immediately preceding the commencement of the case.

25. Pension Funds.

None If the debtor is not an individual, list the name and federal taxpayer identification number of any pension fund to which the debtor, as an employer, has been responsible for contributing at any time within **six years** immediately preceding the commencement of the case.

[If completed by an individual or individual and spouse]

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

| Date: April 22, 2014 | Signature /s/ Diane Ottolenghi of Debtor | Diane Ottolenghi |
|-----------------------------|--|------------------|
| Date: | Signature of Joint Debtor (if any) | |
| | 0 continuation pages attached | |

Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. § 152 and 3571.

United States Bankruptcy Court Northern District of Ohio

| IN RE: | | Case No | |
|---|--|---|--------------------------------|
| Ottolenghi, Diane | | Chapter 7 | |
| | Debtor(s) | | |
| СНАР | TER 7 INDIVIDUAL DEBTO | OR'S STATEMENT OF INTENTION | |
| PART A – Debts secured by pr estate. Attach additional pages | | e fully completed for EACH debt which is sec | ured by property of the |
| Property No. 1 | | | |
| Creditor's Name: Jem Home Solutions | | Describe Property Securing Debt: 20 Otterbein Dr | |
| Property will be (check one): Surrendered Retaine | d | | |
| If retaining the property, I into Redeem the property Reaffirm the debt | end to (check at least one): | | 11 11 9 5 8 522(5) |
| Other. Explain | | (for example, avoid lien using | g 11 U.S.C. § 522(f)). |
| Property is (check one): Claimed as exempt | Not claimed as exempt | _ | |
| Property No. 2 (if necessary) | | | |
| Creditor's Name: Midland IRA | | Describe Property Securing Debt: 20 Otterbein Dr | |
| Property will be (check one): Surrendered Retaine | d | | |
| If retaining the property, I inte ☐ Redeem the property ✓ Reaffirm the debt ☐ Other. Explain | | (for example, avoid lien using | g 11 U.S.C. § 522(f)). |
| Property is (check one): Claimed as exempt | Not claimed as exempt | | |
| PART B – Personal property su additional pages if necessary.) | bject to unexpired leases. (All three | columns of Part B must be completed for each t | unexpired lease. Attach |
| Property No. 1 | | | |
| Lessor's Name: | Describe Leased | Property: Lease will be as 11 U.S.C. § 365 Yes No | ssumed pursuant to $S(p)(2)$: |
| Property No. 2 (if necessary) | | | |
| Lessor's Name: | Describe Leased | Property: Lease will be as 11 U.S.C. § 365 Yes No | sumed pursuant to $S(p)(2)$: |
| 1 continuation sheets attache | ed (if any) | | |
| I declare under penalty of per personal property subject to a | | intention as to any property of my estate so | ecuring a debt and/or |
| Date: April 22, 2014 | /s/ Diane Ottoleng Signature of Debtor | hi | |
| | Signature of Joint D | ebtor | |

CHAPTER 7 INDIVIDUAL DEBTOR'S STATEMENT OF INTENTION

(Continuation Sheet)

PART A – Continuation

Continuation sheet ___1 of ___1

| Property No. 3 | | | |
|--|---|--|---|
| Creditor's Name: Richland Bank | | Describe Property Secur 20 Otterbein Dr | ring Debt: |
| Property will be (check one): Surrendered Retained | | | |
| If retaining the property, I intend to (check at a Redeem the property Reaffirm the debt Other. Explain Property is (check one): | | (for example | e, avoid lien using 11 U.S.C. § 522(f)). |
| Claimed as exempt Not claimed as e | xempt | | |
| Property No. 4 | | | |
| Creditor's Name: Sara Jones Borstock | | Describe Property Secur 20 Otterbein Dr | ring Debt: |
| Property will be (check one): ☐ Surrendered Retained | | | |
| If retaining the property, I intend to (check at least one): ☐ Redeem the property ☑ Reaffirm the debt ☐ Other. Explain | | e, avoid lien using 11 U.S.C. § 522(f)). | |
| Property is (check one): ☐ Claimed as exempt ✓ Not claimed as e | xempt | | |
| Property No. | Property No. | | |
| Creditor's Name: Describe Property Securing Debt: | | ring Debt: | |
| Property will be (check one): Surrendered Retained | | | |
| If retaining the property, I intend to (check at least one): Redeem the property Reaffirm the debt Other. Explain | | | |
| Property is (check one): Claimed as exempt Not claimed as exempt | | | |
| PART B – Continuation | | | |
| Property No. | | | |
| Lessor's Name: | Describe Leased Property: Lease will be assumed pursuant to 11 U.S.C. § 365(p)(2): ☐ Yes ☐ No | | |
| Property No. | | | |
| Lessor's Name: | Describe Leased | Property: | Lease will be assumed pursuant to 11 U.S.C. § 365(p)(2): ☐ Yes ☐ No |

United States Bankruptcy Court Northern District of Ohio

| IN | NRE: | Case No | | |
|----|---|---|-----------------|------------------|
| Ot | ttolenghi, Diane | Chapter 7 | | |
| | | tor(s) | | |
| | DISCLOSURE O | F COMPENSATION OF ATTORNEY FOR DEBTOR | | |
| 1. | | e 2016(b), I certify that I am the attorney for the above-named debtor(s) and that category, or agreed to be paid to me, for services rendered or to be rendered on behalf of allows: | | |
| | For legal services, I have agreed to accept | | \$ | 500.00 |
| | Prior to the filing of this statement I have received | | \$ | 500.00 |
| | Balance Due | | \$ | 0.00 |
| 2. | The source of the compensation paid to me was: | Debtor Other (specify): | | |
| 3. | The source of compensation to be paid to me is: | Debtor Other (specify): | | |
| 4. | I have not agreed to share the above-disclosed | compensation with any other person unless they are members and associates of my | law firm. | |
| | I have agreed to share the above-disclosed comtogether with a list of the names of the people s | pensation with a person or persons who are not members or associates of my law sharing in the compensation, is attached. | firm. A copy of | f the agreement, |
| 5. | In return for the above-disclosed fee, I have agreed to | o render legal service for all aspects of the bankruptcy case, including: | | |
| | b. Preparation and filing of any petition, schedulec. Representation of the debtor at the meeting of | rendering advice to the debtor in determining whether to file a petition in bankrupts, statement of affairs and plan which may be required; creditors and confirmation hearing, and any adjourned hearings thereof; | cy; | |
| | d. Representation of the debtor in adversary process.e. [Other provisions as needed] | pedings and other contested bankruptey matters; | | |
| 6. | By agreement with the debtor(s), the above disclose Any adversary or other contested matter. | | | |
| | | | | |
| | I certify that the foregoing is a complete statement of a proceeding. | CERTIFICATION ny agreement or arrangement for payment to me for representation of the debtor(s) | in this bankrup | tey |
| | April 22, 2014 | /s/ Robert Goldberger | | |
| - | Date | Robert Goldberger Robert Goldberger 0022372 10 West Newlon Place Mansfield, OH 44902 (419) 524-5555 Fax: (419) 526-5515 goldberger.robert@yahoo.com | | |

UNITED STATES BANKRUPTCY COURT

NOTICE TO CONSUMER DEBTOR(S) UNDER §342(b) OF THE BANKRUPTCY CODE

In accordance with § 342(b) of the Bankruptcy Code, this notice to individuals with primarily consumer debts: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case.

You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

Notices from the bankruptcy court are sent to the mailing address you list on your bankruptcy petition. In order to ensure that you receive information about events concerning your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address. If you are filing a joint case (a single bankruptcy case for two individuals married to each other), and each spouse lists the same mailing address on the bankruptcy petition, you and your spouse will generally receive a single copy of each notice mailed from the bankruptcy court in a jointly-addressed envelope, unless you file a statement with the court requesting that each spouse receive a separate copy of all notices.

1. Services Available from Credit Counseling Agencies

With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis. The briefing must be given within 180 days <u>before</u> the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies. Each debtor in a joint case must complete the briefing.

In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge. The clerk also has a list of approved financial management instructional courses. Each debtor in a joint case must complete the course.

2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors

Chapter 7: Liquidation (\$245 filing fee, \$46 administrative fee, \$15 trustee surcharge: Total fee \$306)

Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a "means test" designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, the United States trustee (or bankruptcy administrator), the trustee, or creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.

Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.

The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your

B201A (Form 201A) (11/12) Page 2

discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.

Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

<u>Chapter 13</u>: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$46 administrative fee: Total fee \$281)

Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

Chapter 11: Reorganization (\$1167 filing fee, \$46 administrative fee: Total fee \$1213)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$46 administrative fee: Total fee \$246)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

WARNING: Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court. The documents and the deadlines for filing them are listed on Form B200, which is posted at http://www.uscourts.gov/bkforms/bankruptcy forms.html#procedure.

United States Bankruptcy Court Northern District of Ohio

| IN RE: | | Case No. |
|-------------------------------------|--|---|
| Ottolenghi, Diane | | Chapter 7 |
| | Debtor(s) | |
| | VERIFICATION OF CREDITOR MAT | RIX |
| The above named debtor(s) hereby ve | erify(ies) that the attached matrix listing creditor | ors is true to the best of my(our) knowledge. |
| | | |
| | | |
| Date: April 22, 2014 | Signature: /s/ Diane Ottolenghi | |
| | Diane Ottolenghi | Debtor |
| | | |
| Date: | Signature: | |
| | - | Joint Debtor if any |

Allied Interstate PO Box 15548 Wilmington, DE 19886

Bank Of America PO Box 15019 Wilmington, DE 19886

Capital One PO Box 30285 Salt Lake City, UT 84130

Capital One PO Box 70886 Charlotte, NC 28272

Chase PO Box 15153 Wilmington, DE 19886

Citi PO Box 6286 Sioux Falls, SD 57117

Credit One Bank PO Box 98873 Las Vegas, NV 89193

Home Depot PO Box 182676 Columbus, OH 43218

Jem Home Solutions 2012 E Perkins Ave, #152 Sandusky, OH 44870 Midland IRA 1355 LaSalle St, Chicago, IL 60603

Mohela Dept Of Education 633 Spirit Dr Chesterfield, MO 63005

Richland Bank PO Box 355 Mansfield, OH 44901

Sara Jones Borstock 126 Old Rudy York Rd NW Cartersville, GA 30121

Sears
PO Box 183082
Columbus, OH 43210

US Bankruptcy Court 401 McKinley Ave SW Canton, OH 44702

Value City Bankruptcy Dept PO Box 182125 Columbus, OH 43218

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| B22A (Official Form 22A) (Chapter 7) (04/13) | According to the information required to be entered on this statement (check one box as directed in Part I, III, or VI of this statement): |
|--|--|
| In re: Ottolenghi, Diane | ☐ The presumption arises✓ The presumption does not arise☐ The presumption is temporarily inapplicable. |
| Case Number: | |
| (If known) | |

CHAPTER 7 STATEMENT OF CURRENT MONTHLY INCOME AND MEANS-TEST CALCULATION

In addition to Schedules I and J, this statement must be completed by every individual chapter 7 debtor. If none of the exclusions in Part I applies, joint debtors may complete one statement only. If any of the exclusions in Part I applies, joint debtors should complete separate statements if they believe this is required by § 707(b)(2)(C).

| | Part I. MILITARY AND NON-CONSUMER DEBTORS | |
|----|--|--|
| 1A | Disabled Veterans. If you are a disabled veteran described in the Veteran's Declaration in this Part IA, (1) check the box at the beginning of the Declaration, (2) check the box for "The presumption does not arise" at the top of this statement, and (3) complete the verification in Part VIII. Do not complete any of the remaining parts of this statement. | |
| IA | Declaration of Disabled Veteran. By checking this box, I declare under penalty of perjury that I am a disabled veteran (as defined in 38 U.S.C. § 3741(1)) whose indebtedness occurred primarily during a period in which I was on active duty (as defined in 10 U.S.C. § 101(d)(1)) or while I was performing a homeland defense activity (as defined in 32 U.S.C. §901(1)). | |
| 1B | Non-consumer Debtors. If your debts are not primarily consumer debts, check the box below and complete the verification in Part VIII. Do not complete any of the remaining parts of this statement. | |
| | Declaration of non-consumer debts. By checking this box, I declare that my debts are not primarily consumer debts. | |
| | Reservists and National Guard Members; active duty or homeland defense activity. Members of a reserve component of the Armed Forces and members of the National Guard who were called to active duty (as defined in 10 U.S.C. § 101(d)(1)) after September 11, 2001, for a period of at least 90 days, or who have performed homeland defense activity (as defined in 32 U.S.C. § 901(1)) for a period of at least 90 days, are excluded from all forms of means testing during the time of active duty or homeland defense activity and for 540 days thereafter (the "exclusion period"). If you qualify for this temporary exclusion, (1) check the appropriate boxes and complete any required information in the Declaration of Reservists and National Guard Members below, (2) check the box for "The presumption is temporarily inapplicable" at the top of this statement, and (3) complete the verification in Part VIII. During your exclusion period you are not required to complete the balance of this form, but you must complete the form no later than 14 days after the date on which your exclusion period ends, unless the time for filing a motion raising the means test presumption expires in your case before your exclusion period ends. | |
| 1C | Declaration of Reservists and National Guard Members. By checking this box and making the appropriate entries below, I declare that I am eligible for a temporary exclusion from means testing because, as a member of a reserve component of the Armed Forces or the National Guard | |
| | a. I was called to active duty after September 11, 2001, for a period of at least 90 days and I remain on active duty /or/ I was released from active duty on, which is less than 540 days before this bankruptcy case was filed; | |
| | OR | |
| | b. I am performing homeland defense activity for a period of at least 90 days /or/ I performed homeland defense activity for a period of at least 90 days, terminating on, which is less than 540 days before this bankruptcy case was filed. | |

Part II. CALCULATION OF MONTHLY INCOME FOR § 707(b)(7) EXCLUSION Marital/filing status. Check the box that applies and complete the balance of this part of this statement as directed. a. Unmarried. Complete only Column A ("Debtor's Income") for Lines 3-11. b. Married, not filing jointly, with declaration of separate households. By checking this box, debtor declares under penalty of perjury: "My spouse and I are legally separated under applicable non-bankruptcy law or my spouse and I are living apart other than for the purpose of evading the requirements of § 707(b)(2)(A) of the Bankruptcy Code." Complete only Column A ("Debtor's Income") for Lines 3-11. c. Married, not filing jointly, without the declaration of separate households set out in Line 2.b above. Complete both 2 Column A ("Debtor's Income") and Column B ("Spouse's Income") for Lines 3-11. d. Married, filing jointly. Complete both Column A ("Debtor's Income") and Column B ("Spouse's Income") for Lines 3-11. All figures must reflect average monthly income received from all sources, derived during Column A Column B the six calendar months prior to filing the bankruptcy case, ending on the last day of the Debtor's Spouse's month before the filing. If the amount of monthly income varied during the six months, you **Income Income** must divide the six-month total by six, and enter the result on the appropriate line. 3 \$ 520.00 \$ Gross wages, salary, tips, bonuses, overtime, commissions. Income from the operation of a business, profession or farm. Subtract Line b from Line a and enter the difference in the appropriate column(s) of Line 4. If you operate more than one business, profession or farm, enter aggregate numbers and provide details on an attachment. Do not enter a number less than zero. Do not include any part of the business expenses entered on Line b as a deduction in Part V. 4 Gross receipts Ordinary and necessary business expenses Subtract Line b from Line a Business income \$ \$ Rent and other real property income. Subtract Line b from Line a and enter the difference in the appropriate column(s) of Line 5. Do not enter a number less than zero. **Do** not include any part of the operating expenses entered on Line b as a deduction in Part V. 5 \$ Gross receipts Ordinary and necessary operating expenses Subtract Line b from Line a Rent and other real property income \$ \$ \$ 6 Interest, dividends, and royalties. 7 Pension and retirement income. \$ \$ Any amounts paid by another person or entity, on a regular basis, for the household expenses of the debtor or the debtor's dependents, including child support paid for 8 that purpose. Do not include alimony or separate maintenance payments or amounts paid by your spouse if Column B is completed. Each regular payment should be reported in only \$ \$ one column; if a payment is listed in Column A, do not report that payment in Column B. **Unemployment compensation.** Enter the amount in the appropriate column(s) of Line 9. However, if you contend that unemployment compensation received by you or your spouse was a benefit under the Social Security Act, do not list the amount of such compensation in Column A or B, but instead state the amount in the space below: 9 Unemployment compensation claimed to be a benefit under the Social Security Act Debtor \$ Spouse \$

| B22A (| Official Form 22A) (Chapter 7) (04/13) | | | | |
|--------|--|----|--------|----|--------|
| 10 | Income from all other sources. Specify source and amount. If necessary, list additional sources on a separate page. Do not include alimony or separate maintenance payments paid by your spouse if Column B is completed, but include all other payments of alimony or separate maintenance. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, crime against humanity, or a a victim of international or domestic terrorism. | 3 | | | |
| | a. \$ |] | | | |
| | b. \$ |] | | | |
| | Total and enter on Line 10 | \$ | | \$ | |
| 11 | Subtotal of Current Monthly Income for § 707(b)(7). Add Lines 3 thru 10 in Column A and, if Column B is completed, add Lines 3 through 10 in Column B. Enter the total(s). | \$ | 520.00 | \$ | |
| 12 | Total Current Monthly Income for § 707(b)(7). If Column B has been completed, add Line 11, Column A to Line 11, Column B, and enter the total. If Column B has not been completed, enter the amount from Line 11, Column A. | | | | 520.00 |
| | Part III. APPLICATION OF § 707(B)(7) EXCLUSION | | | | |
| 13 | Annualized Current Monthly Income for § 707(b)(7). Multiply the amount from Line 12 by the number 12 and enter the result. | | | | |
| 14 | Applicable median family income. Enter the median family income for the applicable state and household size. (This information is available by family size at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) | | | | |
| | a. Enter debtor's state of residence: Ohio b. Enter debtor's household size: 1 | | | | |
| 15 | Application of Section707(b)(7). Check the applicable box and proceed as directed. ✓ The amount on Line 13 is less than or equal to the amount on Line 14. Check the box for "The presumption does not arise" at the top of page 1 of this statement, and complete Part VIII; do not complete Parts IV, V, VI, or VII. ☐ The amount on Line 13 is more than the amount on Line 14. Complete the remaining parts of this statement. | | | | |

Complete Parts IV, V, VI, and VII of this statement only if required. (See Line 15.)

| Part IV. CALCULATION OF CURRENT MONTHLY INCOME FOR § 707(b)(2) | | | | | | | |
|--|---|--|---|----|--|--|--|
| 16 | Ente | r the amount from Line 12. | | \$ | | | |
| 17 | Line debto paym debto | tal adjustment. If you checked the box at Line 2.c, enter on Line 17 the total of an 11, Column B that was NOT paid on a regular basis for the household expenses of the price of the specify in the lines below the basis for excluding the Column B incept of the spouse's tax liability or the spouse's support of persons other than the deler's dependents) and the amount of income devoted to each purpose. If necessary, litteents on a separate page. If you did not check box at Line 2.c, enter zero. | he debtor or the ome (such as otor or the | | | | |
| | a. | | \$ | | | | |
| | b. | | \$ | | | | |
| | c. | | \$ | | | | |
| | Tot | al and enter on Line 17. | | \$ | | | |
| 18 | Current monthly income for § 707(b)(2). Subtract Line 17 from Line 16 and enter the result. | | | | | | |
| Part V. CALCULATION OF DEDUCTIONS FROM INCOME | | | | | | | |
| Subpart A: Deductions under Standards of the Internal Revenue Service (IRS) | | | | | | | |
| National Standards: food, clothing and other items. Enter in Line 19A the "Total" amount from IRS National Standards for Food, Clothing and Other Items for the applicable number of persons. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) The applicable number of persons is the number that would currently be allowed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support. | | | | | | | |

| B22A (| Official Form 22A) (Chapter 7) (04/13) | | | | | | |
|--------|--|-----|-------------|-----------|--|----|--|
| 19B | National Standards: health care. Enter in Line a1 below the amount from IRS National Standards for Out-of-Pocket Health Care for persons under 65 years of age, and in Line a2 the IRS National Standards for Out-of-Pocket Health Care for persons 65 years of age or older. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) Enter in Line b1 the applicable number of persons who are under 65 years of age, and enter in Line b2 the applicable number of persons who are 65 years of age or older. (The applicable number of persons in each age category is the number in that category that would currently be allowed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support.) Multiply Line a1 by Line b1 to obtain a total amount for persons under 65, and enter the result in Line c1. Multiply Line a2 by Line b2 to obtain a total amount for persons 65 and older, and enter the result in Line c2. Add Lines c1 and c2 to obtain a total health care amount, and enter the result in Line 19B. Persons under 65 years of age Persons 65 years of age or older | | | | | | |
| | a1. Allowance per person b1. Number of persons | b2. | Number of p | | | | |
| | c1. Subtotal | c2. | Subtotal | , crisons | | | |
| | C1. Subtotal | C2. | Subtotal | | | \$ | |
| 20A | Local Standards: housing and utilities; non-mortgage expenses. Enter the amount of the IRS Housing and Utilities Standards; non-mortgage expenses for the applicable county and family size. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court). The applicable family size consists of the number that would currently be allowed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support. | | | | | \$ | |
| 20B | Local Standards: housing and utilities; mortgage/rent expense. Enter, in Line a below, the amount of the IRS Housing and Utilities Standards; mortgage/rent expense for your county and family size (this information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court)(the applicable family size consists of the number that would currently be allowed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support); enter on Line b the total of the Average Monthly Payments for any debts secured by your home, as stated in Line 42; subtract Line b from Line a and enter the result in Line 20B. Do not enter an amount less than zero. [a. IRS Housing and Utilities Standards; mortgage/rental expense" \$ | | | | | | |
| | b. Average Monthly Payment for any debts secure any, as stated in Line 42 | | \$ | | | | |
| | c. Net mortgage/rental expense Subtract Line b from Line a | | | | | | |
| | C. Net mortgage/rental expense Subtract Line o from Line a | | | | | | |
| 21 | Local Standards: housing and utilities; adjustment. If you contend that the process set out in Lines 20A and 20B does not accurately compute the allowance to which you are entitled under the IRS Housing and Utilities Standards, enter any additional amount to which you contend you are entitled, and state the basis for your contention in the space below: | | | | | \$ | |
| | I and Standards, transportation, valida aparetian/public transportation armongs. You are artifold to | | | | | | |
| 22A | If you checked 0, enter on Line 22A the "Public Transportation" amount from IRS Local Standards: Transportation. If you checked 1 or 2 or more, enter on Line 22A the "Operating Costs" amount from IF Local Standards: Transportation for the applicable number of vehicles in the applicable Metropolitan Statistical Area or Census Region. (These amounts are available at www.usdoj.gov/ust/ or from the clerl | | | | | \$ | |
| | of the bankruptcy court.) | | | | | | |

| B22A (| Official Form 22A) (Chapter 7) (04/13) | | | | |
|--|--|-----|--|--|--|
| 22B | Local Standards: transportation; additional public transportation expense. If you pay the operating expenses for a vehicle and also use public transportation, and you contend that you are entitled to an additional deduction for your public transportation expenses, enter on Line 22B the "Public Transportation" amount from IRS Local Standards: Transportation. (This amount is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) | | | | |
| Local Standards: transportation ownership/lease expense; Vehicle 1. Check the number of vehicles for which you claim an ownership/lease expense. (You may not claim an ownership/lease expense for more than two vehicles.) 1 2 or more. Enter, in Line a below, the "Ownership Costs" for "One Car" from the IRS Local Standards: Transportation (available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court); enter in Line b the total of the Average Monthly Payments for any debts secured by Vehicle 1, as stated in Line 42; subtract Line b from Line a and enter the result in Line 23. Do not enter an amount less than zero. | | | | | |
| | a. IRS Transportation Standards, Ownership Costs Average Monthly Payment for any debts secured by Vehicle 1, as b. stated in Line 42 c. Net ownership/lease expense for Vehicle 1 Subtract Line b from Line | | | | |
| | | | | | |
| 24 | Local Standards: transportation ownership/lease expense; Vehicle 2. Complete this Line only if you checked the "2 or more" Box in Line 23. Enter, in Line a below, the "Ownership Costs" for "One Car" from the IRS Local Standards: Transportation (available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court); enter in Line b the total of the Average Monthly Payments for any debts secured by Vehicle 2, as stated in Line 42; subtract Line b from Line a and enter the result in Line 24. Do not enter an amount less than zero. | | | | |
| | a. IRS Transportation Standards, Ownership Costs, Second Car \$ | | | | |
| | Average Monthly Payment for any debts secured by Vehicle 2, as b. stated in Line 42 c. Net ownership/lease expense for Vehicle 2 Subtract Line b from Line | ; a | | | |
| 25 | Other Necessary Expenses: taxes. Enter the total average monthly expense that you actually incur for all | | | | |
| 26 | Other Necessary Expenses: involuntary deductions for employment. Enter the total average monthly payroll deductions that are required for your employment, such as retirement contributions, union dues, and uniform costs. Do not include discretionary amounts, such as voluntary 401(k) contributions. | | | | |
| 27 | Other Necessary Expenses: life insurance. Enter total average monthly premiums that you actually pay for term life insurance for yourself. Do not include premiums for insurance on your dependents, for whole life or for any other form of insurance. | | | | |
| 28 | Other Necessary Expenses: court-ordered payments. Enter the total monthly amount that you are required to pay pursuant to the order of a court or administrative agency, such as spousal or child support payments. Do not include payments on past due obligations included in Line 44. | | | | |
| 29 | Other Necessary Expenses: education for employment or for a physically or mentally challenged child. Enter the total average monthly amount that you actually expend for education that is a condition of employment and for education that is required for a physically or mentally challenged dependent child for whom no public education providing similar services is available. | | | | |
| 30 | Other Necessary Expenses: childcare. Enter the total average monthly amount that you actually expend on childcare — such as baby-sitting, day care, nursery and preschool. Do not include other educational payments. | | | | |
| 31 | Other Necessary Expenses: health care. Enter the total average monthly amount that you actually expend on health care that is required for the health and welfare of yourself or your dependents, that is not reimbursed by insurance or paid by a health savings account, and that is in excess of the amount entered in Line 19B. Do not include payments for health insurance or health savings accounts listed in Line 34. | | | | |

| B22A (| Official Form 22A) (Chapter 7) (04/13) | | | | |
|--------|--|-------------------------|----|--|--|
| 32 | Other Necessary Expenses: telecommunication services. Enter the total average monthly amount that you actually pay for telecommunication services other than your basic home telephone and cell phone service — such as pagers, call waiting, caller id, special long distance, or internet service — to the extent necessary for your health and welfare or that of your dependents. Do not include any amount previously deducted. | | | | |
| 33 | Total Expenses Allowed under IRS Standards. Enter the total o | of Lines 19 through 32. | \$ | | |
| | Subpart B: Additional Living Ex Note: Do not include any expenses that yo | | | | |
| | Health Insurance, Disability Insurance, and Health Savings Account Expenses. List the monthly expenses in the categories set out in lines a-c below that are reasonably necessary for yourself, your spouse, or your dependents. | | | | |
| | a. Health Insurance | \$ | | | |
| 34 | b. Disability Insurance | \$ | | | |
| 34 | c. Health Savings Account | \$ | | | |
| | Total and enter on Line 34 | | \$ | | |
| | If you do not actually expend this total amount, state your actual total average monthly expenditures in the space below: | | | | |
| | | | | | |
| 35 | Continued contributions to the care of household or family members. Enter the total average actual monthly expenses that you will continue to pay for the reasonable and necessary care and support of an elderly, chronically ill, or disabled member of your household or member of your immediate family who is unable to pay for such expenses. | | | | |
| 36 | Protection against family violence. Enter the total average reasonably necessary monthly expenses that you actually incurred to maintain the safety of your family under the Family Violence Prevention and Services Act or other applicable federal law. The nature of these expenses is required to be kept confidential by the court. | | | | |
| 37 | Home energy costs. Enter the total average monthly amount, in excess of the allowance specified by IRS Local Standards for Housing and Utilities, that you actually expend for home energy costs. You must provide your case trustee with documentation of your actual expenses, and you must demonstrate that the additional amount claimed is reasonable and necessary. | | | | |
| 38 | Education expenses for dependent children less than 18. Enter the total average monthly expenses that you actually incur, not to exceed \$156.25* per child, for attendance at a private or public elementary or secondary school by your dependent children less than 18 years of age. You must provide your case trustee with documentation of your actual expenses, and you must explain why the amount claimed is reasonable and necessary and not already accounted for in the IRS Standards. | | | | |
| 39 | Additional food and clothing expense. Enter the total average monthly amount by which your food and clothing expenses exceed the combined allowances for food and clothing (apparel and services) in the IRS National Standards, not to exceed 5% of those combined allowances. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) You must demonstrate that the additional amount claimed is reasonable and necessary. | | | | |
| 40 | Continued charitable contributions. Enter the amount that you will continue to contribute in the form of cash or financial instruments to a charitable organization as defined in 26 U.S.C. § 170(c)(1)-(2). | | | | |
| 41 | Total Additional Expense Deductions under § 707(b). Enter the total of Lines 34 through 40 | | | | |

^{*} Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

| Subpart C: Deductions for Debt Payment | | | | | | | | |
|--|--|--|---|---|---|---|--------|--|
| | you of Paymenthe to follow | re payments on secured claims own, list the name of the creditor, nent, and check whether the paymotal of all amounts scheduled as cwing the filing of the bankruptcy. Enter the total of the Average M. | identify the include ontractual case, divi | he property securing les taxes or insurance lly due to each Secure ded by 60. If necessa | the debt, state the Ave. The Average Monted Creditor in the 60 | verage Monthly thly Payment is months | | |
| 42 | | Name of Creditor | <u>·</u> | Securing the Debt | Average Monthly Payment | Does payment include taxes or insurance? | | |
| | a. | | | | \$ | ☐ yes ☐ no | | |
| | b. | | | | \$ | ☐ yes ☐ no | | |
| | c. | | | | \$ | yes no | | |
| | | | | Total: Ad | d lines a, b and c. | |] | |
| | reside you r credi cure forec | r payments on secured claims. ence, a motor vehicle, or other properties in a pay include in your deduction 1/6 tor in addition to the payments list amount would include any sums losure. List and total any such an eate page. | operty ne 60th of an sted in Lin in default | cessary for your suppy amount (the "cure ane 42, in order to maith that must be paid in order. | ort or the support of amount") that you mu ntain possession of the order to avoid reposs | your dependents, ust pay the he property. The session or | | |
| 43 | | Name of Creditor | | Property Securing the | he Debt | 1/60th of the Cure Amount | | |
| | a. | | | | | \$ | | |
| | b. | | | | | \$ | | |
| | c. | | | | | \$ | | |
| | | | | | Total: Add | l lines a, b and c. |] \$ | |
| 44 | Payments on prepetition priority claims. Enter the total amount, divided by 60, of all priority claims, such as priority tax, child support and alimony claims, for which you were liable at the time of your bankruptcy filing. Do not include current obligations, such as those set out in Line 28. | | | | | | \$ | |
| | follo | oter 13 administrative expenses wing chart, multiply the amount in instrative expense. | | | | | | |
| | a. | Projected average monthly chap | oter 13 pla | an payment. | \$ | | | |
| 45 | b. Current multiplier for your district as determined under schedules issued by the Executive Office for United States Trustees. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) X | | | | | | | |
| | c. | Average monthly administrative case | e expense | of chapter 13 | Total: Multiply Line and b | es a | \$ | |
| 46 | Total Deductions for Debt Payment. Enter the total of Lines 42 through 45. | | | | | | \$ | |
| | | Si | ubpart D | : Total Deductions f | rom Income | | · | |
| 47 | Tota | l of all deductions allowed und | er § 707(l | (2). Enter the total | of Lines 33, 41, and | 46. | \$ | |

| Only |
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| - Forms |
| 0-998-2424] |
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| nc. |
| EZ-Filing, |
| 1993-2013 |
| (0) |

| (| Official Form 22A) (Chapt Part | t VI. DETERMINATION OF § 707(b)(2) PRESUMPTION | N | | | | |
|----|--|--|--------------------|-----------------|--|--|--|
| 48 | Enter the amount from L | ine 18 (Current monthly income for § 707(b)(2)) | | \$ | | | |
| 49 | Enter the amount from Line 47 (Total of all deductions allowed under § 707(b)(2)) | | | | | | |
| 50 | Monthly disposable income under § 707(b)(2). Subtract Line 49 from Line 48 and enter the result. | | | | | | |
| 51 | 60-month disposable income under § 707(b)(2). Multiply the amount in Line 50 by the number 60 and enter the result. | | | | | | |
| | Initial presumption deter | rmination. Check the applicable box and proceed as directed. | | | | | |
| | | 51 is less than \$7,475*. Check the box for "The presumption does complete the verification in Part VIII. Do not complete the remainded | | e top of page 1 | | | |
| 52 | | on Line 51 is more than \$12,475*. Check the box for "The presunt, and complete the verification in Part VIII. You may also complet VI. | | | | | |
| | The amount on Line 5 53 though 55). | 51 is at least \$7,475*, but not more than \$12,475*. Complete the | remainder of P | Part VI (Lines | | | |
| 53 | Enter the amount of your | r total non-priority unsecured debt | | \$ | | | |
| 54 | Threshold debt payment result. | amount. Multiply the amount in Line 53 by the number 0.25 and en | nter the | \$ | | | |
| | Secondary presumption of | determination. Check the applicable box and proceed as directed. | | | | | |
| 55 | ☐ The amount on Line 51 is less than the amount on Line 54. Check the box for "The presumption does not arise" at the top of page 1 of this statement, and complete the verification in Part VIII. | | | | | | |
| | The amount on Line 51 is equal to or greater than the amount on Line 54. Check the box for "The presumption arises" at the top of page 1 of this statement, and complete the verification in Part VIII. You may also complete Part VII. | | | | | | |
| | | Part VII. ADDITIONAL EXPENSE CLAIMS | | | | | |
| | Other Expenses. List and describe any monthly expenses, not otherwise stated in this form, that are required for the health and welfare of you and your family and that you contend should be an additional deduction from your current monthly income under § 707(b)(2)(A)(ii)(I). If necessary, list additional sources on a separate page. All figures should reflect your average monthly expense for each item. Total the expenses. | | | | | | |
| | Expense Description | 1 | Monthly A | mount | | | |
| 56 | a. | | \$ | | | | |
| | b. | | \$ | | | | |
| | c. | | \$ | | | | |
| | | Total: Add Lines a, b and c | \$ | | | | |
| | | Part VIII. VERIFICATION | | | | | |
| | I declare under penalty of poth debtors must sign.) | perjury that the information provided in this statement is true and co | orrect. (If this a | joint case, | | | |
| 57 | Date: April 22, 2014 | Signature: /s/ Diane Ottolenghi (Debtor) | | | | | |
| | Date: | Signature: | | | | | |

^{*} Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

United States Bankruptcy Court Northern District of Ohio

| IN RE: | Case No | |
|---|--|---|
| Ottolenghi, Diane | Chapter 7 | |
| Debtor(s) | | |
| | TICE TO CONSUMER DEBTOR(S THE BANKRUPTCY CODE | (i) |
| Certificate of [Non-Attor | ney] Bankruptcy Petition Preparer | |
| I, the [non-attorney] bankruptcy petition preparer signing the onotice, as required by § 342(b) of the Bankruptcy Code. | lebtor's petition, hereby certify that I deliv | ered to the debtor the attached |
| Printed Name and title, if any, of Bankruptcy Petition Prepare Address: | petition prep the Social Se principal, res | ity number (If the bankruptcy arer is not an individual, state curity number of the officer, sponsible person, or partner of cy petition preparer.) |
| X | (Required by | 11 U.S.C. § 110.) |
| Signature of Bankruptcy Petition Preparer of officer, principal partner whose Social Security number is provided above. | , responsible person, or | |
| Certific | ate of the Debtor | |
| I (We), the debtor(s), affirm that I (we) have received and read | d the attached notice, as required by § 3420 | (b) of the Bankruptcy Code. |
| Ottolenghi, Diane | X /s/ Diane Ottolenghi | 4/22/2014 |
| Printed Name(s) of Debtor(s) Signature of Debtor | | Date |

Instructions: Attach a copy of Form B 201A, Notice to Consumer Debtor(s) Under § 342(b) of the Bankruptcy Code.

Case No. (if known)

Use this form to certify that the debtor has received the notice required by 11 U.S.C. § 342(b) **only** if the certification has **NOT** been made on the Voluntary Petition, Official Form B1. Exhibit B on page 2 of Form B1 contains a certification by the debtor's attorney that the attorney has given the notice to the debtor. The Declarations made by debtors and bankruptcy petition preparers on page 3 of Form B1 also include this certification.

Signature of Joint Debtor (if any)

Date